

Division of Licensing and Protection
HC 2 South, 280 State Drive
Waterbury, VT 05671-2060
<http://www.dail.vermont.gov>
Survey and Certification Voice/TTY (802) 241-0480
Survey and Certification Fax (802) 241-0343
Survey and Certification Reporting Line: (888) 700-5330
To Report Adult Abuse: (800) 564-1612

June 29, 2016

Ms.. Brenda Schill, Administrator
Eastview At Middlebury
100 Eastview Terrace
Middlebury, VT 05753-9327

Dear Ms.. Schill:

Enclosed is a copy of your acceptable plans of correction for the survey conducted on June 6, 2016. Please post this document in a prominent place in your facility.

We may follow-up to verify that substantial compliance has been achieved and maintained. If we find that your facility has failed to achieve or maintain substantial compliance, remedies may be imposed.

Sincerely,

Pamela M. Cota, RN
Licensing Chief

Division of Licensing and Protection

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0603	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 06/06/2016
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

EASTVIEW AT MIDDLEBURY

**100 EASTVIEW TERRACE
MIDDLEBURY, VT 05753**

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
R100	Initial Comments: An unannounced on-site survey was conducted on 6/6/16 by the Division of Licensing and Protection subsequent to a facility mandated self-report of alleged resident exploitation. The following regulatory violation was cited.	R100	Please see attached plan of correction	
R179 SS=C	V. RESIDENT CARE AND HOME SERVICES 5.11 Staff Services 5.11.b The home must ensure that staff demonstrate competency in the skills and techniques they are expected to perform before providing any direct care to residents. There shall be at least twelve (12) hours of training each year for each staff person providing direct care to residents. The training must include, but is not limited to, the following: (1) Resident rights; (2) Fire safety and emergency evacuation; (3) Resident emergency response procedures, such as the Heimlich maneuver, accidents, police or ambulance contact and first aid; (4) Policies and procedures regarding mandatory reports of abuse, neglect and exploitation; (5) Respectful and effective interaction with residents; (6) Infection control measures, including but not limited to, handwashing, handling of linens, maintaining clean environments, blood borne pathogens and universal precautions; and (7) General supervision and care of residents. This REQUIREMENT is not met as evidenced by: Based on staff interview and record review, the	R179		

Division of Licensing and Protection

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Brenda A. Schull

Executive Director

6/23/16

STATE FORM

6899

KBD911

If continuation sheet 1 of 2

R179 POC accepted 6/23/16 MBolton RN/PMC

Division of Licensing and Protection

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0603	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 06/06/2016
NAME OF PROVIDER OR SUPPLIER EASTVIEW AT MIDDLEBURY		STREET ADDRESS, CITY, STATE, ZIP CODE 100 EASTVIEW TERRACE MIDDLEBURY, VT 05753		
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R179	Continued From page 1 facility failed to assure that all staff who provide care and services to residents of the home receive training in policies and procedures regarding mandatory reports of abuse, neglect, and exploitation. (All residents of the home have the potential to be affected by this omission). Findings include: Per staff interviews and record review, all staff of the facility were not trained on policy/procedures related to mandatory reports of resident Abuse, Neglect and Exploitation upon hire and annually, per Vermont Residential Care Home Licensing Regulations requirements. Subsequent to a facility self-report of exploitation of 2 residents via theft of personal property by a staff member, a review of mandatory trainings related to Abuse Policy was conducted for a sample of staff. The review included interviews with staff from the following departments: nursing, dietary, housekeeping and activities/enrichment. Based on the interviews with 9 staff, only nursing staff (4 of 4 interviewed) were aware of the fact that they are mandated reporters regarding the abuse of vulnerable adults in Vermont and only nursing staff stated that they had received training in Mandatory Reporting of Abuse. The 5 others interviewed included dietary, activities and housekeeping staff. During interview, the RN Director of Clinical Services confirmed that at present time, only nursing staff have been receiving training on Abuse Reporting.	R179		

EastView at Middlebury Plan of Corrective Action

Actions to be taken to correct the deficiency: We have revised our orientation program to include the mandatory training sessions for all staff. Previously this training was provided to our Health Services staff as they were considered to be the direct care staff to residents. We now will expand the offerings to all staff including but not limited to:

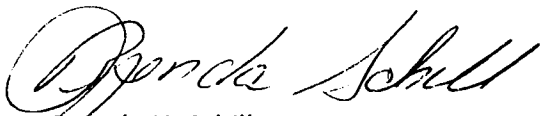
1. Resident rights
2. Fire safety and emergency evacuation
3. Resident emergency response procedures such as the Heimlich maneuver, accidents, police or ambulance contact and first aid;
4. Policies and procedures regarding mandatory reports of abuse, neglect and exploitation;
5. Respectful and effective interaction with residents;
6. Infection control measures, including but not limited to hand washing, handling of linens, maintaining clean environments, blood borne pathogens and universal precautions; and
7. General supervision and care of residents

The Director of Operations is responsible for tracking every employee and ensuring that they have completed the orientation program including the appropriate training sessions and also tracking to ensure they complete the training on an annual basis on their anniversary.

The training records will be maintained in a file with access to the Directors to ensure all of their staff have all completed the required 12 hours of training sessions.

We are implementing this correction immediately as the courses are already available to the Health Services staff and just need to be implemented with the employees in the other departments who have contact with the residents.

Respectfully Submitted,

A handwritten signature in black ink, appearing to read "Brenda H. Schill". The signature is fluid and cursive, with the first name "Brenda" being more prominent than the last name "Schill".

Brenda H. Schill

Executive Director

EastView at Middlebury